## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

| Application Number     | 10/627,556           |  |  |
|------------------------|----------------------|--|--|
| Filing Date            | July 26, 2003        |  |  |
| First Named Inventor   | Jeffrey A. Ledbetter |  |  |
| Art Unit               | 1643                 |  |  |
| Examiner Name          | Lynn Anne Bristol    |  |  |
| Attorney Docket Number | 910180.401C2         |  |  |

| I hereby revoke all previous powers of attorney given in the above-identified application.   |   |       |      |                  |  |  |
|--|---|-------|------|------------------|--|--|
| A Power of Attorney is submitted herewith.   |   |       |      |                  |  |  |
| OR   |   |       |      |                  |  |  |
| hereby appoint the practitioners at Seed IP Law Group PLLC, Customer Number: 85377   |   |       |      |                  |  |  |
| ☑ Please change the correspondence address for the above-identified application to:  |   |       |      |                  |  |  |
| The address associated with Customer Number 85377  |   |       |      |                  |  |  |
| OR   |   |       |      |                  |  |  |
| Firm <i>or</i> Individual Name   |   |       |      |                  |  |  |
| Address  |   |       |      |                  |  |  |
| City   |   | State |      | Zip              |  |  |
| Country  |   |       |      |                  |  |  |
| Telephone  |   | Email |      |                  |  |  |
| I am the:  |   |       |      |                  |  |  |
| ∏Applicant/Inventor.   |   |       |      |                  |  |  |
| Assignee of record of the entire interest. See 37 CFR 3.71.  |   |       |      |                  |  |  |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)   |   |       |      |                  |  |  |
| As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71, to prosecute the application to the exclusion of the inventor(s).   |   |       |      |                  |  |  |
| SIGNATURE of Applicant or Assignee of Record   |   |       |      |                  |  |  |
| Signature Confus   | C Duly                                    |       | Date | January 30, 2009 |  |  |
| Name Kathleen M. De  | Kathleen M. Deeley                        |       |      |                  |  |  |
| Title and Senior Vice Pro  | Senior Vice President and General Counsel |       |      |                  |  |  |
| (Assignee) Trubion Pharm   | ee) Trubion Pharmaceuticals, Inc.         |       |      |                  |  |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |   |       |      |                  |  |  |
| *Total of forms are submitted.   |   |       |      |                  |  |  |